

Form CPF 18A: Report of Independent Expenditure Promoting Election or Defeat of Candidate(s)

	Office	of Campaign and Politic	cal Finance	946 2040	
Insectionality Lice of Campaign and Pe	olitical Finance	E ₁			
Ashburton Place)IIIICAI I IIIIIII	⁶ g		11 9 (80)	
ton, MA 02108 7) 727-8352.					
90 Cart		Det 31 18	106		
Date of Report	(Must be f	iled within 7 business days of expendit	ure(s) in excess of \$100.00 in aggreg	ate)	
Expenditure(s)) Made By: Mas	Massachusetts Nurses Association			
2/10/14/14	(Name of individual or group making ex	(penditure)		
	340	Turnpike St.,	Canton	02021	
		Street Address City/Town Zip			
	1' 1 + (-) For Whom the	Above Expenditure(s) Election of	or Defeat Promoted:		
. Name of Cano	indate(s) For whom the	Above Experience Colores	1 State DOD		
8		Sear Lurra	1 / DAW FRP	/	
		9	t ,		
. Expenditure(s):		* * * * * * * * * * * * * * * * * * *		
	T				
Date Paid	To Whom Paid	Address	Purpose	Amount	
1. 1.	The Republica	an 1860 Mains:	Print Ad:	1515,00	
0/21/06	INC PEPULICE	Sprinafield Ollo			
	011.0	1 0 ())	mailing	88.97	
0/12/06	Saltus Press	10011	0		
		Worcester 01604			
	· .		1		
		re independent expenditures, as o	lefined by M.G.L. c.55, section	n 18A:	
I hereby certify	he expenditures noted a	re independent expenditures, as		. 'li.ana in	
(1) the individu	al(s) or group who made	e the expenditure(s) described her	rein did not solicit or receive a	ny contributions in	
contemplation	on of such expenditure(s	s); and	:- did not cooperate consult	or act in concert wit	
(2) the individu	al(s) or group who made	s); and e the expenditure(s) described her	ee organized on behalf of any	candidate, or any	
agent of a c	andidate or any political	l committee in making such expe			
	that all statements made	e herein are true and accurate.			
7 C 11	mat an sustained			5 5	
		/•			
	he penalties of perjury	•			
	he penalties of perjury		Catrina Anderson	and Covernment	
	he penalties of perjury	1)20 los	irector, Legislation	and Government	
	he penalties of perjury	Date Print	Catrina Anderson Director, Legislation Name of Individual Signer an If of a group)	and Government	